

UNITED STATES DISTRICT COURT
DISTRICT OF SOUTH DAKOTA
_____ DIVISION

Melaine Wilson _____)
547 BIA 28 _____)
Wounded Knee, SD 57794 _____)

(Enter the full name of the Plaintiff[s] in this action) _____) Case No 5:22-cv-5095 _____
vs. _____) (To be assigned by
Oglala Sioux Tribe Election Commission _____) Clerk of District Court)
P.O.Box 2070 _____)
Pine Ridge, S.D. 57770 _____)

(Enter the full name of ALL Defendant[s] in this action. Fed. R. Civ. P. 10(a) requires that the caption of the complaint include the names of all the parties. Merely listing one party and "et al." is insufficient. Please attach additional sheets if necessary.) _____)

COMPLAINT

- I. State the grounds for filing this case in Federal Court (include federal statutes and/or U.S. Constitution provisions, if you know them. Fed .R .Civ. P. 8(a)(1) requires a short and plain statement of the grounds for the court's jurisdiction.):
I have invoked my 1868 Fort Laramie Treaty Rights-Article 1 to have Department of Interior Investigate and Prosecute for Oglala Sioux Tribe Election Commission Civil Rights Abuse. The Oglala Sioux Tribe Council is both the Legislative and Judicial Authorities and have allowed the Oglala Sioux Tribe Election Commission to break rules, such as Challenge Votes and using Pencils. This makes it appear that there is Fraud happening with our Votes. They also use the Enrollment Office to verify Address on Challenge Votes, meaning ALL ENROLLED MEMBERS CAN VOTE without Residency Requirements by OST Constitution

II. Plaintiff, Melaine R. Wilson resides at

547 BIA 28

(street address)

Wounded Knee, Oglala,

(city) (county)

South Dakota, 57794, 605-867-6990

(state) (zip) (telephone number)

(If more than one plaintiff, provide the same information for each plaintiff below)

As a Former (Warranted by Congress) Contingency Contracting Officer- it is my Lifelong Duty to Protect Federal Monies, Lands, and Assets from Fraud, Waste and Abuse.

III. Defendant, OST Election Commission resides at, or its business is located at

P.O. Box 2070

(street address)

Pine Ridge, _____,

(city) (county)

South Dakota, 57770, 6058675266

(state) (zip) (telephone number)

(If more than one defendant, provide the same information for each defendant below)

- IV. Statement of claim (State as briefly as possible the facts of your case. Describe how each defendant is involved. You must state exactly what each defendant personally did, or failed to do, which resulted in harm to you. Include also the names of other persons involved, dates, and places. Be as specific as possible. You may use additional paper if necessary):

The initial vetting process to authorize enrolled members who are running for Office is to make sure they know that they are subject to the Bureau of Indian Affairs Uniformed Commercial Codes and the Oglala Sioux Tribe Uniformed Commercial Codes.

- V. Relief (State briefly and exactly what you want the Court to do for you.)
- Transparency of Votes as they are supposed to be and not with pencils and Challenge Votes of Enrolled Members who aren't even living on the Reservation.
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VI. MONEY DAMAGES:

A) Do you claim either actual or punitive monetary damages for the acts alleged in this complaint?

YES []

NO [X]

B) If your answer to "A" is YES, state below the amount claimed and the reason[s] you believe you are entitled to recover such monetary damages:

VII. Do you maintain that the wrongs alleged in the complaint are continuing to occur at the present time?

YES [X]

NO []

VIII. Are you requesting a Jury Trial?

YES []

NO IX

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 2 day of December , 2022

Melaine R Wilson

Signature of Plaintiff[s]

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS	Melaine R. Wilson 547 BIA 28 Wounded Knee, SD 57794	DEFENDANTS	Oglala Sioux Tribe Election Commission P.O.Box 2070 Pine Ridge, South Dakota 57770
(b) County of Residence of First Listed Plaintiff	County of Residence of First Listed Defendant <i>(IN U.S. PLAINTIFF CASES ONLY)</i>		
(EXCEPT IN U.S. PLAINTIFF CASES)		NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.	
(c) Attorneys (Firm Name, Address, and Telephone Number)		Attorneys (<i>If Known</i>)	

II. BASIS OF JURISDICTION <i>(Place an "X" in One Box Only)</i>		III. CITIZENSHIP OF PRINCIPAL PARTIES <i>(Place an "X" in One Box for Plaintiff and One Box for Defendant)</i>					
<input type="checkbox"/> 1 U.S. Government Plaintiff	<input type="checkbox"/> 3 Federal Question <i>(U.S. Government Not a Party)</i>	Citizen of This State	<input type="checkbox"/> PTF 1	<input type="checkbox"/> DEF 1	Incorporated or Principal Place of Business In This State	<input type="checkbox"/> PTF 4	<input type="checkbox"/> DEF 4
<input checked="" type="checkbox"/> 2 U.S. Government Defendant	<input type="checkbox"/> 4 Diversity <i>(Indicate Citizenship of Parties in Item III)</i>	Citizen of Another State	<input type="checkbox"/> 2	<input type="checkbox"/> 2	Incorporated and Principal Place of Business In Another State	<input type="checkbox"/> 5	<input type="checkbox"/> 5
		Citizen or Subject of a Foreign Country	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Foreign Nation	<input type="checkbox"/> 6	<input type="checkbox"/> 6

IV. NATURE OF SUIT <i>(Place an "X" in One Box Only)</i>								
CONTRACT		TORTS		FORFEITURE/PENALTY		BANKRUPTCY	OTHER STATUTES	
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Vctrans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise		PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input type="checkbox"/> 362 Personal Injury - Medical Malpractice		PERSONAL INJURY <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care / Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability		<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/ Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act
REAL PROPERTY		CIVIL RIGHTS		PRISONER PETITIONS		PROPERTY RIGHTS	SOCIAL SECURITY	
<input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property		<input type="checkbox"/> 440 Other Civil Rights <input checked="" type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/ Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education		Habeas Corpus: <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty Other: <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement		<input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act	<input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSDI Title XVI <input type="checkbox"/> 865 RSI (405(g))	
						FEDERAL TAX SUITS	IMMIGRATION	
						<input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	<input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 465 Other Immigration Actions	
Click here for: Nature of Suit Code Descriptions.								

V. ORIGIN <i>(Place an "X" in One Box Only)</i>
<input checked="" type="checkbox"/> 1 Original Proceeding <input type="checkbox"/> 2 Removed from State Court <input type="checkbox"/> 3 Remanded from Appellate Court <input type="checkbox"/> 4 Reinstated or Reopened <input type="checkbox"/> 5 Transferred from Another District (specify) <input type="checkbox"/> 6 Multidistrict Litigation - Transfer <input type="checkbox"/> 8 Multidistrict Litigation - Direct File

VI. CAUSE OF ACTION	Cite the U.S. Civil Statute under which you are filing <i>(Do not cite jurisdictional statutes unless diversity)</i> : Federal Acquisition Regulation Part 3-Bad Business Practices Brief description of cause: Fraud, Waste and Abuse		
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VII. REQUESTED IN COMPLAINT:	<input checked="" type="checkbox"/> CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.	DEMAND \$	CHECK YES only if demanded in complaint: JURY DEMAND: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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VIII. RELATED CASE(S) IF ANY	(See instructions): JUDGE DOCKET NUMBER		
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DATE	SIGNATURE OF ATTORNEY OF RECORD		
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FOR OFFICE USE ONLY			
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RECEIPT #	AMOUNT	APPLYING IFFP	JUDGE	MAG. JUDGE
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